

CONFIDENTIAL RECORD SHEET  
REGISTRATION SERVICE  
BOY SCOUTS OF AMERICA

DATE: 11/21/88

YLL NAME Jack D. Jacobson  
(No initials if you can possibly get full name)

S.S. NO. [REDACTED]

ADDRESS [REDACTED]

CITY Lyons STATE IL ZIP CODE 80540-3264

DATE OF BIRTH 09/11/47 (This is important and should be exact)

APPROXIMATE AGE \_\_\_\_\_ (To be used ONLY when date of birth is not known)

RELIGION Methodist NATIONALITY (Citizen of) CA

OCCUPATION Executive Trainer

EDUCATION \_\_\_\_\_

WEIGHT \_\_\_\_\_ HEIGHT \_\_\_\_\_ RACE CA

COLOR OF HAIR Brown COLOR OF EYES \_\_\_\_\_

ANY DISTINGUISHING PHYSICAL CHARACTERISTICS Tall & heavy set

HOBBIES OR SPECIAL INTERESTS \_\_\_\_\_

MARRIED ☐ SINGLE ☒ NAME OF SPOUSE [REDACTED]

CHILDREN [REDACTED]

(Name, number, ages, if possible)

SCOUTING CONNECTIONS:

UNIT #	CITY	STATE	POSITION	DATE REGISTERED	DATE RESIGNED
<u>P-64</u>	<u>Lonsdale</u>	<u>IL</u>	<u>Unit Committee</u>	<u>11/3/88</u>	<u>03064-</u>
Chartered Organization <u>1st Lonsdale neighborhood</u>					<u>08607</u>

SPECIAL RECOGNITION \_\_\_\_\_

INCIDENT: TYPE 2 DATE OF INCIDENT See Resolution  
Type Resolution

1=Scout Related  
2=Non-scout related  
3=homosexual (not specifically with youth)

1. Internal (only Scouts Know)
2. Criminal action
3. Court action
4. Probationary status
5. Reported to state agency

Check off list of attached documentation

- ✓ 1. Description of incident
- ✓ 2. Victim(s) statement
3. media reports
- Legal proceedings
- Offender's statement
6. Official notification of termination
7. Found guilty/innocent by JOSEPH L. ANGLIM

CONFIDENTIAL

NOV 29 1988

Council Long Beach Signed \_\_\_\_\_

F. STARON

SCOUT EXECUTIVE

3828r-eko-11/3/88

CONF020495

December 2, 1988

Mr. Kent E. Caraway  
Scout Executive  
Longs Peak Council, No. 62

PERSONAL AND CONFIDENTIAL

SUBJECT: Jack D. Jacobson

Dear Kent:

Thank you for the detailed information sent concerning the above Scouter. This case has been reviewed with our attorney and is now on our permanent Confidential file.

Sincerely,

Paul Ernst, Director  
Registration Service

eko

cc: North Central Region

READY TO FILE  
DEC 01 1988  
ERIN O'RILEY



BOY SCOUTS OF AMERICA

BOX 1166, GREELEY, COLORADO 80632

FARR SCOUT CENTER

2215 TWENTY-THIRD AVENUE

November 21, 1988

PERSONAL & CONFIDENTIAL

Paul Ernst, Director  
Registration Services  
National Office - Boy Scouts of America  
1325 Walnut Hill Lane  
P. O. Box 152079  
Irving, TX 75015-2079

Dear Paul:

The enclosed registration confidential record sheet is for Jack D. Jacobson.

The termination of the registration is based on the report from the McHenry County Sheriff's Department in Rockford, Illinois. I have forwarded a copy of this to the Scout Executive of the Blackhawk Area council.

Sincerely,

Kent Caraway  
Council Executive

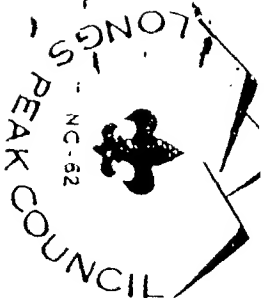
KC/ssm

Enclosures

*Added to C.F. file  
Deleted from reg  
file  
11/29/88  
pm*

SUPPORTED BY SUSTAINING MEMBERS AND UNITED WAYS

CONF020497



BOY SCOUTS OF AMERICA

BOX 1166, GREELEY, COLORADO 80632

FAIR SCOUT CENTER

2215 TWENTY-THIRD AVENUE

November 3, 1988

Mr. Jack D. Jacobson

Lyons, CO 80540


Dr. Mr. Jacobson,

After careful review, we have decided that your registration with the Boy Scouts of America should be suspended. We are therefore compelled to request that you sever any relations that you may have with the Boy Scouts of America.

You should understand that BSA membership registration is a privilege and is not automatically granted to everyone who applies. We reserve the right to suspend registration whenever there is a concern that an individual may not meet the high standards of membership which the BSA seeks to provide for American youth.

If you wish to have this decision reviewed by a Council review committee, please write to us, explaining your version of the facts supporting your claim that your registration as a BSA member should be reinstated.

Sincerely,

  
Kent Caraway  
Scout Executive

SUPPORTED BY SUSTAINING MEMBERS AND UNITED WAYS

CONF020498

DATE AND TIME PHONED TO RECORDING CENTER				CRIMES AGAINST PERSONS CASE REPORT (Field)				McHenry County Sheriff's Dept.			
1. OFFENSE Aggravated Criminal Sexual Abuse				2. CLASSIFICATION 1562				3. DIST. 4-W 20		5. R.O. NUMBER 88-12326	
6. LOCATION NUMBER STREET APT. [REDACTED] Marengo, Ill. 60152				7. DATE AND TIME OCCURRED July 4th 1984				8. DATE AND TIME POLICE ARRIVED 08-31 83 @ 1730 hrs.			
9. VICTIM'S NAME [REDACTED]				10. RESIDENCE ADDRESS [REDACTED]				11. RESIDENCE PHONE [REDACTED]		12. BUSINESS PHONE n/a	
13. PARENT OR GUARDIAN OF VICTIM IF JUVENILE n/a				14. RESIDENCE ADDRESS [REDACTED]				15. RESIDENCE PHONE [REDACTED]		16. BUSINESS PHONE n/a	
17. NAME OF PERSON WHO DISCOVERED BODY (HOMICIDE) n/a				18. RESIDENCE ADDRESS [REDACTED]				19. RESIDENCE PHONE [REDACTED]		20. BUSINESS PHONE [REDACTED]	
21. WITNESSES: NAME SEX RACE DOB (a) see narrative				22. RESIDENCE ADDRESS [REDACTED]				23. RESIDENCE PHONE [REDACTED]		24. BUSINESS PHONE [REDACTED]	
(b)				25. RESIDENCE ADDRESS [REDACTED]				26. RESIDENCE PHONE [REDACTED]		27. BUSINESS PHONE [REDACTED]	
28. NAME OF FIRST OFFICER AT SCENE STAR n/a				29. TIME OFFICER ARRIVED n/a				30. HOW OFFENDER APPROACHED - ENTRY - DIRECTION see narrative			
31. VICTIM'S OCCUPATION SEX RACE DOB Unemployed M Cau. 09-24-68				32. TYPE OF PREMISES WHERE OCCURRED see narrative				33. EXACT LOCATION OF VICTIM ON PREMISES see narrative			
34. WEAPON, INSTRUMENT OR MEANS OF ATTACK see narrative				35. HOW MEANS OF ATTACK USED see narrative				36. IF VICTIM HOSPITALIZED STATE WHERE n/a			
37. NATURE OF INJURIES AND LOCATION ON BODY n/a				38. WHAT DID OFFENDERS SAY see narrative				39. NUMBER OF OFFENDERS SEX RACE DOB 1 M Cau. 091243			
40. VEHICLE USED BY OFFENDERS: MAKE YEAR BODY STYLE COLORS LICENSE OTHER IDENTIFYING MARKS n/a				41. NAME OF PERSON IN D.O. NOTIFIED TIME B. Hendle				42. NAME OF CORNER NOTIFIED TIME n/a			
43. PHOTOGRAPHS TAKEN BY WHOM TIME ARRIVED n/a				44. PERSON IN CHARGE AT SCENE TIME ARRIVED n/a				45. INVENTORY NO. [REDACTED]			
46. Narrative: Reconstruct crime. Identify and describe physical evidence, show exactly where found and how disposed of. Include statements of victim, witnesses and suspects. If suspect arrested, give name, sex, race, age and state "In Custody". Indicate sobriety of victim if possible, and sobriety of witnesses and suspects. State exact location of witnesses at time of crime and distance from scene. Give complete description of suspects, including name if known, nick name, sex, race, age, height, weight, color eyes, hair, complexion, scars, marks, etc.											
08-31-88 @ 1630 hrs. R/O spoke by telephone to [REDACTED] with reference to R.D. #88-7718. She stated that her cousin, [REDACTED] had been a victim of sexual abuse by [REDACTED] Jack Jacobson, over a period of many years and he would like to report this matter. She also advised that she had spoken with Trooper Hamilton, Illinois State Police, about this matter and he told her											
REP. OFFICER Det. Beverly A. Hendle		STAR		REPORTING OFFICER		STAR		SUPERVISOR APPROVING [Signature]		STAR DIST.	

he would check into it and asked her to [REDACTED] so that he would be more familiar with the relationships of the people involved. She has since talked with Trooper Hamilton, who told her that he did not have time to investigate this.

R/O advised her that I would contact [REDACTED]

08-31-88 @ 1730 hrs. R/O met with [REDACTED] at [REDACTED] Wonder Lake. [REDACTED] stated that since the age of 4 or 5, [REDACTED] Jack Jacobson, has been sexually molesting him.

He said that at that time, [REDACTED] and Jacobson were married to each other and were living on [REDACTED] in Wonder Lake near the fire station. Jacobson would take [REDACTED] into the fire station and tell him a story about an old guy running around molesting little boys in Wonder Lake and [REDACTED] said that he would get scared and wonder what was going on. Jacobson would use his hand and then his mouth on [REDACTED] penis.

[REDACTED] said that Jacobson used to give him five or ten dollars and he always told him not to tell anybody about these things.

[REDACTED] said that this went on for several years and when Jacobson lived on a farm [REDACTED] Marengo, he would also do things to [REDACTED]. [REDACTED] is 18 years old now and lives in [REDACTED] and, according to [REDACTED] just wants to forget about these things. [REDACTED] is 20 years old and lives somewhere in [REDACTED] and stated that he would get involved.

[REDACTED] stated that on the 4th of July in 1984, which was prior to [REDACTED] 16th birthday, he was at the [REDACTED] farm and Jack also had [REDACTED] there. [REDACTED] also said that Jack always gave them beer and when they went for a drive in Jack's car, he would pull over and let them drive. He said that Jack would give them fireworks to shoot off and on the 4th of July in 1984, Jack called him up to his room to give him some fireworks.

The [REDACTED] went up to his room, Jack used his [REDACTED] on [REDACTED] penis and made [REDACTED] us [REDACTED] s.

## CONTINUATION SHEET (Field)

McHenry County Sheriff's Dept.

PAGE NUMBER	KIND OF REPORT CONTINUED	OFFENSE - CHARGE OR INCIDENT	NAME OF VICTIM OR ARRESTEE	ARREST OR R.D. NUMBER
2	Crimes Against Persons	Agg.Crim.Sex.Abuse	[REDACTED]	88-12326
<p>hands on Jack's penis [REDACTED] said that he would usually ejaculate in Jack's mouth and sometimes Jack would ejaculate into his hand or a kleenex.</p> <p>Jack's expression all of the time when he would want to do something sexual was that he would ask [REDACTED] if he wanted to make some extra money. He usually gave [REDACTED] some money or things such as beer, fireworks or a .22 rifle. He also gave them money to buy and smoke pot.</p> <p>When they were at the apartment in Pango Jacobson had sex with [REDACTED] in the same room in front of each other. He would usually try to separate them and [REDACTED] told him no before [REDACTED]</p> <p>[REDACTED] said that at Christmastime while up at his father's house in [REDACTED] in 1987, Jack snuck in [REDACTED] room and asked him if he wanted to earn some extra money and he used his mouth on [REDACTED] penis and he wanted [REDACTED] to go down on him and he made [REDACTED] use his hand on Jack's penis.</p> <p>[REDACTED] said that on May 28th, 1988, Jack was visiting at [REDACTED] and Jack asked if he wanted to make some extra money and [REDACTED] told him no and Jack got mad and [REDACTED] went to the other side of the room. He started walking over to [REDACTED] and [REDACTED] girlfriend walked in the room. He also invited [REDACTED] over to his parents' house on [REDACTED] the next day but [REDACTED] turned him down.</p> <p>[REDACTED] said the family was concerned because Jacobson is involved with cub or boy scouts out in Colorado and they felt that he is probably doing the same things to young boys out there. [REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p>				

CONF020501

On 09-01-88 R/O contacted Michelle Wiejaczka from the State's Attorney's office and she stated that the statute of limitations had expired in this case and no charges could be placed against Jacobson.

VICTIM:

OFFENDER : JACOBSON, JACK DAVIS M/W

DOB 09-12-48

Lyons, Colorado 80540

Unemployed

Former address

PARENTS:



# BOY SCOUTS OF AMERICA

## ADULT APPLICATION

### PART ONE

**UNIT SCOUTERS**

Check one

☐ Pack No. \_\_\_\_\_

☐ Troop No. \_\_\_\_\_

☐ Team No. \_\_\_\_\_

☐ Post No. \_\_\_\_\_

☐ Ship No. \_\_\_\_\_

**COUNCIL/DISTRICT SCOUTERS**

Council/district position

**CUB Roundtable Comm**

District No. **7**

Please print one letter in each space—press hard; you are making three copies.

First name and initial Last name

**JACK D. JACOBSON**

Social Security number

[REDACTED]

Address—street or R.F.D.

[REDACTED]

Additional address information (if necessary)

[REDACTED]

City State ZIP code

**LYONS CO 80540-3264**

Home phone

[REDACTED]

Business phone

[REDACTED]

Date of birth

**09/1/47**

Training—see cover

**B**

Position Code

**83**

Present employment—occupation, employer, and business address

[REDACTED]

Previous employment—occupation, employer, and business address

[REDACTED]

**LOUISVILLE CO 80028-0001**

Years at this employment

**10**

Years at this employment

[REDACTED]

Boys' Life

☐ New leader

☒ Former leader

Sex

**M**

Marital status

**D**

Number of children

**4**

Ages of children

**15 18**  
**20 22**

Personal signature—see back cover

**Jack D. Jacobson**

Date

**9-1-88**

Registration fee

**\$1.00**

Boys' Life fee

**\$1.00**

Term (months)

**12**

Unit renewal date

**Month Year**

☒ If applicant has an unexpired membership certificate, registration may be accomplished by paying \$1 for processing the transfer. Check the box and attach certificate. It will be returned by the council.

**MULTIPLE REGISTRATION**  
**PRIMARY DISTRICT COMMITTEE**

Transfer from:

Council

Nat'l unit No.

Member ID No.

Approval—see back cover (sign here and in part two)

FOR COUNCIL USE

OCT 1 REC'D

NATIONAL OFFICE COPY

# ADULT APPLICATION PART TWO

BOY SCOUTS OF AMERICA

Name JACK D. JACOBSON  
 Driver's license no. [REDACTED]  
 State CO Expiration 9-11-1990

## 1. Previous Scouting background (for last 5 years)

Position	Council	Year
WL	BLACKHAWK	84
WL-DC-WA	BLACKHAWK	85
WL-DC-CA	BLACKHAWK	86
DC-CSRTS-UC-WA	LONGS PEAK	87
DC-CSRTC-UC-WA	LONGS PEAK	88

## 2. Previous experience: What other experience, if any, have you had that may assist you in working with youth?

As a volunteer: LITTLE LEAGUE COACH  
SUNDAY SCHOOL TEACHER  
 In your work or profession: COURSE DESIGNER/  
INSTRUCTOR-CORPORATE EDUCATION

## 3. Previous residences (for last 5 years)

1979-1986  
[REDACTED]  
MARENGO IL 60152-9698

## 4. Current memberships (religious, community, youth, business, or professional organization)

FIRST UNITED METHODIST-LONGMONT  
PINEWOOD SPRINGS FIRE DEPARTMENT

## 5. Education or special training

☐ Elementary ☒ High school ☒ College ☐ Advanced degree(s)

2 YRS.

## 6. Health limitations or special considerations

NONE

## 7. History of legal involvement

a. Are you free of illegal substance abuse?

Yes ☒ No ☐

b. Have you ever been convicted of criminal offense? (If yes, please explain)

Yes ☐ No ☒

c. Have you ever been arrested or convicted for the use or sale of drugs?

Yes ☐ No ☒

d. Have you ever been hospitalized or treated for alcohol or substance abuse?

Yes ☐ No ☒

e. Have you ever been arrested or convicted of child neglect or abuse?

Yes ☐ No ☒

f. Has your driver's license ever been suspended or revoked?

Yes ☐ No ☒

g. Other than the above matters, is there any fact or circumstance involving you or your background that would call into question your being entrusted with the supervision, guidance, and care of young people?

Yes ☐ No ☒

## 8. References. Please list those who are familiar with your character as it relates to

In

As

At

On

By

Name JOHN SELF  
 Address [REDACTED]  
 City/ZIP LYONS CO 80540-3127  
 Relationship FRIEND Phone [REDACTED]

Name BOB FORSHAY  
 Address [REDACTED]  
 City/ZIP LONGMONT CO 80501  
 Relationship FRIEND Phone [REDACTED]

Carefully read the following statement before signing

I, the undersigned, understand that

a. The information that I have provided may be verified by contacting persons or organizations named in this application and I hereby release and agree to hold harmless from liability any person or organization that provides information concerning me to the Boy Scouts of America or local council thereof

b. In signing this application, I swear or affirm that the information that I have given herein is true and correct

Jack D. Jacobson Date 9-1-88  
 Sign here and in part one

Reviewed and approved by

[Signature] Date 9/8/88  
 Sign here and in part one

CHARTERED ORGANIZATION COPY